

THE RHODE ISLAND DEPARTMENT OF MENTAL HEALTH, RETARDATION & HOSPITALS

# FY 2001 PROGRESS REPORT

JULY 1, 2000-JUNE 30, 2001

MEETING THE CHALLENGE



"As a department, we have a shared set of values, a uniformity of purpose. Our philosophy, mission and goals connect us, and keep us united and determined to meet every challenge."



## Introduction

It is my pleasure to present the FY 2001 Progress Report for our department. It reflects another year of excellence in which we set high goals for ourselves, and successfully met or exceeded them.

2001 was significant because it was the last year of our four-year operational plan, "The Next Generation, 1997-2001". Among the goals set forth in that document are the establishment of a behavioral care pilot system as gateway to and coordinator of behavioral and physical health services for individuals with mental illness; the establishment of a managed care system for acute health and long term care services for persons with developmental disabilities; the development of an information technology plan designed to assure appropriate capacity for communication with consumers, state agencies and the state's populace; the expansion of public awareness and knowledge of the mission of the department through community outreach and advocacy; the management and distribution of resources within the department to assure conformance with the department's mission, goals and objectives; and the establishment of organizational performance measures and client outcomes that reflect best practices and national accreditation standards.

The efforts of our workforce have enabled us to meet these goals and in most cases surpass them.

The RIde the Wave National Conference on self-advocacy held in Providence in September, 2000 in collaboration with Advocates in Action brought together 800 vocal, active and committed people from around the nation determined to increase their opportunities for a rich and meaningful life. In 2001, grants from the Division of Behavioral Healthcare Services provided the foundation for several new initiatives to develop best practices around co-occurring disorders. Our information networking infrastructure is now 75% complete. A three-year Safety and JCAHO Accreditation and Partnership Service will make JCAHO compliance a way of life.

Each day, the 2100-member MHRH workforce is challenged to carry out the department's mission in ways that reflect consumer choice, while working with a changing social, political, medical and economic environment. The innovations,

creative thinking, bold initiatives and award-winning programs generated by our employees are our way of meeting the challenges of our respective jobs. These jobs range from fiscal manager to program coordinator to lab technician, computer technologist, social worker, electrician, or physician.

We are inspired by the courage and determination of the people we serve who face challenges each day, so that their vision of inclusion can be achieved. Over the course of my tenure as director, I have met hundreds of people whose strength of will and refusal to succumb to perceived limitations energize our spirits and strengthen our resolve to carry out our mission with pride and enthusiasm.

I think of the members of our Peoples' Advocacy Council, who have the courage to face audiences to tell of their personal challenges and how they have met each challenge in order to reside, shop, attend classes, vote, work and play in communities throughout Rhode Island.

I am in awe of individuals in recovery from addiction to alcohol or substance abuse, who stand up in the midst of the stigma placed on addictive behavior, and ask that we recognize their struggle, and understand their challenge to be free of the behaviors that the diseases of alcoholism and drug dependency engender.

I look to the example of scores of Eleanor Slater Hospital residents in need of long-term hospital care, yet who continue to pursue active lives with community involvement, participation in educational and recreational programs, and advocacy activities.

As a department, we have a shared set of values, a uniformity of purpose. Our philosophy, mission and goals connect us, and keep us united and determined to meet every challenge.

It is a reflection of our national psyche to rise to the occasion, to find hope in seemingly hopeless odds, to learn lessons from the gravest of setbacks, and to possess a resiliency that powers us to new and awesome achievement.

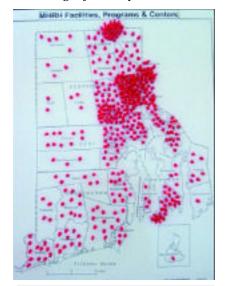
We have a "can do" spirit.

Together, we will persevere.

A Hardyn Former Director

#### MEETING THE CHALLENGE

The Rhode Island Department of Mental Health, Retardation and Hospitals is a multifaceted organization with a long history of medical and social services for individuals with a variety of physical and mental disabilities who need support to lead lives of dignity and hope.



MHRH delivers services statewide. The number of facilities and programs is currently 420, serving over 46,000 Rhode Islanders with serious disabilities.

We serve several distinct populations with highly individualized and specialized needs.

These individuals include:

 Hospital patients with chronic, long-term debilitating diseases and medical conditions who are not eligible for nursing homecare because a doctor has determined that they need hospital-level care.

- Persons with developmental disabilities with limited or impaired cognitive levels resulting from birth defects or other medical conditions.
- Persons with serious or persistent mental illness, emotional difficulties and psychological disorders.
- Persons with problems of addiction, alcohol or other substance abuse.

# **Meeting Our Goals**

The goals we set for ourselves four years ago in our Operational Plan can now be reviewed in the present. The accomplishments that follow reflect our efforts to achieve these goals. While accomplishments were made in many areas, 2001 was significant for its focus on performance improvement and accountability; significant improvements and applications in information management and technology; the establishment of databases in a wide variety of categories; and the establishment of new and innovative services and pro-

grams for the people we serve. Our 2001 Progress Report should be reviewed in the context of these established goals.

#### **DEPARTMENTAL GOALS**

THE NEXT GENERATION (1977-2001)

- To assist, support, encourage and advocate for consumer empowerment, and to actively engage consumer participation, guidance and direction to the fullest extent.
- To actively pursue collaborative relationships with sister state agencies to improve statewide service delivery.
- To establish a managed care system for acute health and long term care services and supports for adults with developmental disabilities (CHOICES).
- To establish a behavioral health care pilot system as both gateway to and coordinator of behavioral and physical health services for individuals with mental illness (RICOVER).



- To maintain the necessary range of medical services at the Eleanor Slater Hospital as established by service demand, while determining future hospital services, for which populations, and the role of these services in the statewide hospital and health care system.
- To develop a plan to redirect existing resources to establish a clinical program at the Eleanor Slater Hospital for individuals with mental illness and substance abuse.
- To heighten the department's commitment and active agenda in research by establishing an MHRH research coordinating and advisory committee, whose purpose will be to encourage responsible research ventures and oversee research activity.
- To upgrade MHRH program evaluation efforts and integrate standards, licensing and quality assurance functions within a managed care system.
- To improve department wide performance accountability.
- To retool, redeploy, redirect, restructure our human, capital and fiscal resources in new and creative ways to fulfill our organizational goals.
- To expand public awareness and knowledge of the mission of the Department through community

- outreach and advocacy, emphasizing consumer choice, consumer relations and family involvement.
- To develop and implement departmental policy to effectively utilize available human, fiscal and technical resources within Executive Branch directives and external quality assurance standards.
- To coordinate and oversee the contract with a proposed vendor that will finance, design, construct and make modifications to the aging Central Power Plant at the Howard Center. Completion of this large project will provide safe, consistent power necessary to provide utilities used by the Department of MHRH, Corrections, Children, Youth and Families, Human Services, Health, and Labor and Training.
- To develop and implement a long range information technology plan designed to assure the appropriate capacity for communication with consumers, sister state agencies and Rhode Island taxpayers.

- To manage and distribute resources within the department to assure conformance with the Department's mission, goals and objectives.
- To establish organizational performance measures (both internal and external) and client outcomes that are reflective of best practices and national accreditation standards.

#### **Director's Office**

The director is the lead in carrying out our mandate, and provides direction to assure that it is done effectively. It is the responsibility of the director to ensure that consumers have access to quality services throughout the state. As the leader of the department, the director articulates a vision, directs people and the organization toward it, and speaks about it outside the organization.



Officers of the People's Advocacy Council

Highlights of the director's activities during the year include:

- Participation with government groups; national and state advocacy groups; and issues groups:
  - NASDDD; NASADAD; NASMHPD; HCFA; Paratransit Task Force; Governor's Advisory Council on Health; Northeast Council of State Governments; Conference on Homelessness - Advent House; RI Housing Resource Commission; RI Justice Commission Policy Board & Steering Committee; Emotional Competency Partnership; Children's Cabinet; DCYF System of Care Task Force; MH Parity LegislativeWorking Group; IRMB; SAMSHA workgroup on Behavioral Healthcare Services.
- Speeches/Presentations:

   OASIS Pathways to Recovery
   Conference; Children's Friend and
   Service; Hillsgrove House; East Bay
   MH Center; RICARES; Advocates in
   Action; Surgeon General's Visit to
   RI; Methadone Best Practices Conference; New Leaf Re-Opening;
   Massachusetts Behavioral Health

- Association; CSP Certification/ Graduation; PAL; SA Prevention Regional Conference; People in Partnerships; NE Public Health Conference; MH Bell Recognition.
- Civic Collaborative/Board Leadership: Democracy Compact; Leadership RI; RACE; Hassenfeld Fellowship Review Committee; DOC/MHRH partnership; RI Women Veterans Memorial Association.
- Initiatives: Family Practice/MH Collaborative.

#### Office of the Director

#### Office of Management Services

 Coordinated the departmental technology initiatives, including the establishment of a crossdivisional technology team, the continuation of the network "rollout", expansion of network infrastructure and technical support, establishment of a web presence and departmental intra-net.

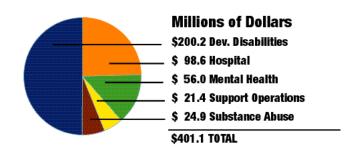
- Initiated the design of the Legislative Review Committee.
- Continued the Power Plant conversion and construction project through negotiations and permits processes.

#### Office of Legal Services

- Represented petitioners in approximately 200 cases pursuant to the Mental Health Law.
- Successfully obtained substituted consent for 23 clients of the Division of Developmental Disabilities.
- Obtained substituted consent for medication treatment for psychiatric inpatients in approximately 35 cases.
- Represented MHRH in approximately 90 cases involving "forensic" issues.
- With staff from the Division of Developmental Disabilities, provided training to all DDD providers regarding substituted consent procedures for clients with developmental disabilities.

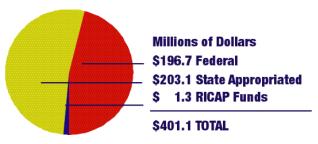
# **RI Department of MHRH**

# FY 2001 Expenditures by Program



# RI Department of MHRH

# FY 2001 Source of Funds



# Office of Information Management and System Technologies

- RISAIL software was installed and configured on all necessary desktops and training was conducted with all end users, power users and user administrators.
- The networking infrastructure is approximately 75% complete.
- A State Wide Network analysis is currently under way to plan and schedule the upgrading of the telecom connections at the Zambarano Unit and to wire parts of this unit for data.
- Continued enhancement of the intranet site with links to our databases in order to share information more effectively with our employees.

# Office of Facilities and Program Standards and Licensure

- Continued to assure compliance with licensing standards for programs and residences serving the consumers of Departmental services. The Department currently licenses a total of 380 programs. This is an increase of 12 licensed programs in the last year, 9 additional DDD programs and 3 additional SA programs.
- The departmental primary facilities database was moved to the OFPSL.
- The OFPSL initiated a provider Assessment Survey Form for post-survey feedback. This is to be utilized as a quality improvement tool within the OFPSL.
- A collaborative effort between the OFSPL, DDD and the DDD providers resulted in a new process to ensure that regular environmental inspections of group homes are performed and documented.

#### Office of Performance Improvement

- Spearheaded the departmental priority to re-design the licensing process for Behavioral Healthcare Services.
   Convened an internal team that resulted in the development of a process to involve the provider and consumer communities, as well as other stakeholders, in this task.
- Conducted a root cause analysis of the Emergency Psychiatric Hold issue and developed four Process Action Teams that included community stakeholders. This work continues.

#### Office of Public Information

 Provided support to the mission of the department through the publication of documents, reports, editorials and newsletters designed to inform and educate program staff and the general public about the services and activities of the department and its allied agencies.

## Office of Operations

- Led the department in managing its \$400 m budget in accordance with federal and state laws, specifically the Fiscal Integrity and Accountability Act.
- Managed a reimbursement program, which resulted in capture of in excess of \$90 m in revenue for the support of the Eleanor Slater Hospital, as well as an additional \$8.4 m in federal DSH payments.
- Served as pilot site agency for the design and development of the State's Financial Management Information System (FMIS), now called RISAIL, which began on July 1, 2001.
- Processed Medicaid claims with less than a 1% error / denial rate with the Department of Human Services' EDS Medicaid program.

#### MEETING THE CHALLENGE

- Began the 3rd phase (design phase) of an integrated billing system for all payors of service for the Eleanor Slater Hospital. When complete, this accounts receivable system will provide for an enhanced reimbursement/ management information system.
- Managed the department's Capital Development Budget in support of the Pastore Center infrastructure, the Eleanor Slater Hospital, and MHRH's community facilities. Capital repairs to community facilities reached 96.4% of budgeted funds. Major items included 15 kitchens, 18 bathrooms, 15 roofs, 24 floors and 5 emergency generator designs.
- Reduced water consumption at the power plant, bringing the program-to-date water reduction to 43%.
- Aggressive "fuel shopping" resulted in actual fuel costs being lower than they would have been under the traditional contract.
- Completed the design and awarded a contract for Phase I of the Water System Capital Improvement Project.
- With the Office of Management Services, completed the technical attachment to the design and construction agreement for the power plant upgrade. The project is underway.

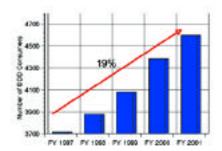


 Retained an Architectural and Engineering firm for a traffic study of the Pastore Center. The study is to identify problems and solutions for campus traffic and parking.

## **Division of Developmental Disabilities**

#### Self Direction/Personal Voice/Inclusion

- Assisted in planning for the RIde the Wave National Conference on self advocacy in collaboration with Advocates in Action held in September 2000; over 800 people from Rhode Island and other states attended.
- MHRH funded Parents and families for Alternate Living, (PAL) to administer the Employment Information Network, a resource for people with disabilities interested in employment. The Speakers Bureau has over 30 people with disabilities who present their personal employment experiences to adults with disabilities, students from various high schools and employers. 20 presentations were made to approximately 500 people. The Peer Support Network includes Peer Mentors who encourage individuals considering employment to pursue jobs.
- The Employment Information Network and the Office of Quality Assurance wrote and produced a 40-minute motivational video, "Work-It Is More Than Just A Paycheck!" to encourage people with disabilities to obtain employment. The video features the personal stories of four individuals who are successfully working and a description of resources available in RI. A premier night in November 2000 included a performance from actress and comedienne Geri Jewel.
- Collaborated with Advocates in Action to develop a new division brochure highlighting the "road to services", written in easily understandable language with graphics and icons



The number of DDD consumers has grown 19% between 1997-2001.

#### Office of Health Care

- Finalized and implemented the Division's Health Care Guidelines and Nursing Clinical Standards.
- Provided technical support to agencies in the implementation of the Health Care Guidelines and Nursing Clinical Standards.
- Responded to 74 requests for health care/nursing technical support from Office of Quality Assurance, Social Services, provider agencies, DDD Rate Setting Committee, MHRH Office of the Director, DHS, PAL, and DDNA. Implemented a data-base tracking system to track technical support requests and conduct trend analysis.

## Office of Quality Assurance

 Coordinated activities for participation in the National Core Indicators Project and provided

- management information, data on people with disabilities and systems information along with 18 other states for performance measures. This included data from 350 individual consumer interviews conducted by individuals trained by PAL through the Quality of Life Initiative.
- Conducted the Continuous Quality Improvement (CQI) project at seven community agencies involving over 150 people with disabilities in focus groups to identify satisfaction with services, what they consider important, and the outcomes of supports provided by agencies.
- Hosted a statewide meeting for the Chairs of Human Rights Committees to provide information on the upcoming HCFA survey and to encourage networking opportunities.
- Responded to various inquiries regarding human rights violations and other incidents from community agencies, family members and citizens and responded with requests for clarification, additional information as well as technical assistance.
- Disseminated 2500 Family
   Satisfaction Surveys for the National
   Core Indicators project, and received
   980 completed forms regarding the
   services/supports of family members
   with a developmental disability and
   provided follow up information to
   over 400 families on services,
   supports, resources, etc.

- Designed and distributed 2000 magnets for the division with graphics and telephone numbers for social services, quality assurance, Office of Health Care and the executive director
- The executive director, DDD, and the Office of Health Care implemented a variety of activities in preparation of the federal HCFA Review of RI's Home and Community-Based Waiver.

#### **Office of Community Support**

- Received and processed 251 adult applications for services.
- Identified 169 new people eligible for services.
- Funded 92 new residential services.
- Completed Personal Capacities Inventories (PCI) on 600 people with disabilities.
- Certified two new provider agencies: Mentor, Inc and Work Opportunities Unlimited.
- Hosted visits from individuals from England, Japan, Brazil and the Netherlands who were here to learn more about RI's system of support for people with disabilities.

 Continued efforts in the area of Positive Supports, decreasing the number of individuals with restrictive programs from over 800 persons in 1997 to 205 persons in 2001.

#### **Information Management**

- DDD continues to take a lead role in building the MHRH Intranet. The Intranet team installed the Intranet web server and has added content throughout the year.
- DDD Quick Tracking Intranet-Application - Created an application that allows DDD employees to view the Informix data using their web browser and to click on hyperlinks to requested information.
- Medical Reference Databases -Configured a web-based version of the Micromedex Health Care reference databases on the MHRH Intranet.
- Agency Reviews The technical team participated in community agency audits in preparation for the HCFA audit.
- CHOICES Completed the APD and distributed APD documents to senior staff and DHS, created a CHOICES presentation to assist with obtaining state funding, assisted in creating the RFP for the Management Consultant, and created monthly CHOICES Development Status reports.

- Designed, developed and implemented a computer-based system for tracking SSI Medicaid status from DHS data files.
- Automated the Authorization of Services for Title XIX Waiver.

#### Office of Financial Management

- Began pilot for the 1/12 payment system. This was approved by HCFA and implemented in collaboration with DHS and EDS.
- Implemented new support employment definition and forms. Began collaboration with DHS to implement the Supported Employment income disregard in the Long Term Care system at DHS.
- Developed and implemented an ongoing reconciliation procedure of Day Program Services. Provided associated training to 20 provider agencies.
- Entered PCI data into a database.
- Participated in the fiscal component of the Agency Reviews in preparation for the HCFA Review.
- Responded to a Survey of Residential Facilities through the purchase of new furniture as noted in the survey.
- Received HCFA (CMS) approval of Advance Planning Document.

Streamlined the accounting system used for Bond Funds.

### Rhode Island Community Supports and Living

- Established "Get Out and Work Out" fitness program at URI with PT staff for participants of RICLAS.
- Provided technical assistance for information technology needs of DDD/MHRH.
- Intensified and expanded new employees orientation program.
- Initiated "The Star Award" which helps to promulgate the positive stories and accomplishments of the individuals we support.
- Established a self advocacy group named "All Advocates Together"
   4 staff group advisors-and an average group attendance of 25 members.
- Advocacy members gave testimony via videotape at a Statewide Advocacy Meeting for budget hearings regarding issues such as housing, funding, staff, and transportation.
- Implemented "Get A Life", an interactive staff training game show format that challenges staff to think differently about the job - completed 8 training sessions with 104 staff participating.

 Continued consumer community involvement with the RI Food Bank, Bread Runs, Meals on Wheels, Recycling, "Adopt-a-Spot", a Chorus Group and "Friends and Favors".



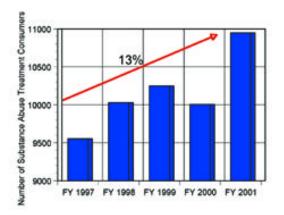
#### **Division of Behavioral Healthcare Services**

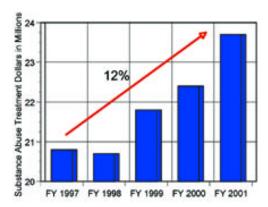
- Supported 26 treatment and 75 prevention substance abuse programs; and 10 mental health programs.
- Implemented new grant awards: "Partnership
  Development Programs: Substance Abuse Initiatives for
  Person with Co-Occurring Substance Abuse and Mental
  Health Disorders" to provide the foundation for several
  new initiatives in RI to develop best practices around
  co-occurring disorders and to expand our treatment
  capacity.
- Began a pilot program of mental health treatment at two substance abuse residential treatment facilities.
- Conducted a regional "Best Practices in Opioid Treatment Conference".
- · Awarded the first "Gambling Treatment" funds.
- Coordinated the department's legislative effort, which resulted in the passage of ten bills including the creation of the Governor's Council on Behavioral Health.

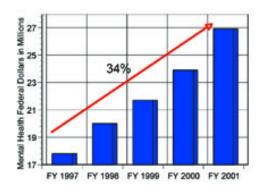
- Initiated a process with the office of Management Service to combine mental health and substance abuse licensing standards.
- Developed a survey methodology to comply with SYNAR requirements, including sample selections, statistical analysis and summary reporting.
- Developed recovery standards for Rhode Island in cooperation with a broad-based group of community consumers.
- Developed standards for the operation of court diversion programs.
- Created a reporting mechanism for mental health centers to determine daily which of their clients have been incarcerated.
- Funded two new consumer-operated drop-in centers, the ALIVE Center in Woonsocket and Consumers for Self-Reliance in Wakefield.

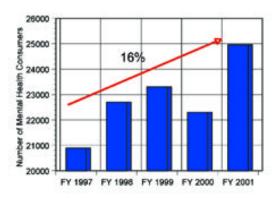


 Completed a comprehensive mental health training in all areas of the state for elder service providers and, in conjunction with the Department of Elderly Affairs, established the Elder Mental Health Coalition.











The number of consumers in mental health grew 16% between 1997 and 2001. During this 5-year time period, the contribution to programs through federal dollars has increased 34%, while the contribution from state dollars has remained steady at around \$29 million.

- In partnership with RIHMFC, funded 28 new scattered site apartment units for people with mental illness; provided leverage funding for two Section 8 apartment complexes to provide housing for 22 adults; supported two CMHCs to develop mainstream Section 8 vouchers for 50 scattered site apartment units; supported 8 mental health agencies in providing matched rental assistance from RIHMFC with services to keep formerly homeless community support clients housed in 65 Shelter Plus Care apartments.
- Improved the reliability of the Outcome Evaluation
  Instrument by collecting and entering data, preparing
  queries and monthly reports, and working closely with
  provider agencies to utilize data for quality improvement.

### **Division of Human Resource Management**

### Office of Employee Relations

- Coordinated a supplemental RN staffing program for ESH, by hiring per diem registered nurses on a contractual basis. This program reduces overtime dependence and allows the department to efficiently cover short-term staffing voids.
- Expanded the Direct Care Temporary Hiring program to include CLAs within the Division of Developmental Disabilities. This program resulted in fiscal savings and is an excellent recruiting mechanism and has reduced overtime.

#### Office of Labor Relations

- Represented the department in contract negotiations.
- Established a sick leave bank program.

# Office of Human Resource Development & Disability Management

Established the First Report of Injury database.
 Responsibility for generating the FRI was transferred to agency payroll offices.



- Produced and published an analytical report with action recommendations on mandatory RN overtime.
- Developed workforce/succession planning project database.

## **Eleanor Slater Hospital**

- Appointed a new medical director to oversee the hospital's clinical program and to develop working relationships with the state's acute community hospitals and other healthcare agencies. Hired four additional Board Certified physicians to provide specialty services.
- Consolidated the Eleanor Slater Hospital Information Desk and Nurse Staffing Office for a savings of approximately \$150,000.
- Appointed a new nursing leadership team to provide guidance and direction to all nursing service personnel in preparation of our upcoming full survey by the Joint Commission.
- Established a per diem nurse category to create consultant contractual agreements with individual registered nurse professionals to decrease the amount of mandatory overtime. Twelve positions have been filled.



- Streamlined the hiring of Certified Nursing Assistant
  positions through an agreement between the Division
  of Human Resource Management, our hospital, and the
  State Budget Office, to expediently hire temporary
  Certified Nursing Assistants and improve patient/staff
  ratios on all units. A new system utilizes non-direct care
  positions to fund direct care slots.
- Reduced the hospital's long-term care licensed bed capacity from 700 to 628. The Zambarano Unit went from 220 to 200; Manual Mathias from 160 to 120; and The Virks Building from 87 to 75.
- Converted the electrical service/power plant at the Zambarano Unit to Pascoag Electric to reduce costs and eliminate future capital. This will result in economic use of electricity.
- Computerization/Automation:
- Networked over 75 key hospital employees
- Computerized Nurse Staffing Office
- Implemented the R.I. Sail Program
- Began Computerized Team Conferencing to Improve Patient Care Planning
- Computerized hospital's Admissions Office and its relationship with Medical Records
- Upgraded Laboratory Service computer system
- Installed 40 digital phones at the Zambarano Unit
- Placed Pinel Building on Group Wise Network

- Demolished four old hospital buildings at the Zambarano Unit.
- Created a Labor/Management Committee to review patient/staff ratios on hospital units based on acuity levels of patients and identified ways to better utilize personnel to reduce the number of mandatory overtime hours. The committee will meet quarterly to work on issues surrounding the utilization of personnel and financial resources.
- Developed a Bio-Medical Engineering Clinical Internship Program with the University of Rhode Island in which URI's Bio-Medical Engineering students work with patients who require the use of computers and other electrical equipment to have better control over their environment.
- Expanded medical specialty and support contractual arrangements with the University of Rhode Island.
- Developed a single chart system that eliminates duplication in the areas of history and physicals, assessments and reassessments, lab and diagnostic data, and progress notes, and makes the transition between Acute, Long Term Care and Adult Psychiatric Services smoother.
- Initiated a new contract with the Maryland Hospital Associate, Quality Indicator Project (QIP) to monitor indicators for our HAP and Long Term Care Programs.
   New indicators were chosen.
- Patient participation in on and off site educational and psychotherapeutic programs sponsored by our Adult Psychiatric Service increased by 15%.

## **Conclusion:**

We serve Rhode Islanders in every city and town, and many of our treatment and service programs are available around the clock.

Some interesting facts about MHRH are:

- On any given day, MHRH serves over 46,000 people through 420 facilities and programs that respond to a variety of citizen's needs
- Through its Division of Substance Abuse, MHRH funds treatment services for 12,000 Rhode Island residents regardless of their ability to pay for services.
- The Rhode Island publicly funded and privately operated mental health system has consistently been rated in the top three systems nationally.
- Under the direction of MHRH's Division of Financial Management, we recover in excess of \$150,000,000 of reimbursement per year for services provided by the department.
- At the Community Mental Health Centers, up to half of the individuals with serious mental illness who have participated in special programs have become employed.
- The Eleanor Slater Hospital's occupancy rate on a staffed bed capacity is 88%, or in the 95th percentile of all government hospitals in America.
- The Eleanor Slater Hospital's pharmacy services provide medication to pharmacies associated with mental health clinics throughout the state, servicing over 1800 clients.

At MHRH, we are proud of our work and strive to overcome the barriers about who we are and what we do.

We accept the challenge.

